PART B - FEE(S) TRANSMITTAL

The state of the s	SEP 2 5 2006	her with applicable	fec(s), to: <u>Mail</u> or <u>Fax</u>	Commissione P.O. Box 1450 Alexandria, V (571)-273-288	r for Pate) 'irginia 2 5	ents 2313-1450	hould be completed where
namienance fee nounc	ations.		rders and notification a) specifying a new c				hould be completed where correspondence address as arate "FEE ADDRESS" for
CURRENT CORRESPON	DENCE ADDRESS (Note: Use B		Fee(s) Transmitta	. This certi	ficate cannot be used f	or domestic mailings of the for any other accompanying ent or formal drawing, must	
1251 AVENUE	7590 07/24 KILL & OLICK, OF THE AMERIC NY 10020-1182			I hereby certify the States Postal Servaddressed to the transmitted to the	at this Fee(e of Mailing or Trans s) Transmittal is being fficient postage for firs ISSUE FEE address 1) 273-2885, on the d	g deposited with the United st class mail in an envelope above, or being facsimile late indicated below.
9/26/2006 WABDELR3	00000055 503814		Audrey	de Souz		(Depositor's name)	
		gudy de byor			(Signature)		
1 FC:1501 1400.00 DA 2 FC:1504 300.00 DA 3 FC##0Ration No. 6-00 DA FILING DATE			EIDOENIA VOD DAVON	Septembe		2006	
09/836,135	04/16/2001		FIRST NAMED INVEN Yasushi Hosono		Ailu	MM4424	CONFIRMATION NO.
APPLN. TYPE	N: IMPROVED DISK DV	/D-ROM DRIVE UNIT	WITH A PLAYBACK PUBLICATION FEE I			SK DRIVE METHOL	
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EXAMINER		ART UNIT	CLASS-SUBCLASS	7			-
HINDI,	NABIL Z	369-047380					
Change of corres Address form PTO/S "Fee Address" in	dence address or indication pondence address (or Chalb/122) attached. dication (or "Fee Address (or more recent) attached.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
PLEASE NOTE: Unrecordation as set for (A) NAME OF ASS TEAC Corp	nless an assignee is ident thin 37 CFR 3.11. Comp IGNEE Oration		data will appear on t T a substitute for filin (B) RESIDENCE: (G Japan	he patent. If an ag an assignment. CITY and STATE (OR COUNT	TRY)	ocument has been filed for
a. The following fee(s)						viously paid issue fee	· · · · · · · · · · · · · · · · · · ·
Issue Fee	No small entity discount p	A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 503814 (enclose an extra copy of this form).					
_ ` `	atus (from status indicate	,	☐ b. Applicant is no	o longer claiming S	MALL EN	FITY status. See 37 C	FR 1.27(g)(2).
OTE: The Issue Fee a	nd Publication Fee (if req		d from anyone other th				ne assignee or other party in
Authorized Signature	Syn	mah	•	Date	Septen	nber 19, 2006	5
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dexalidria, virginia 22.	313-1430.	FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the D NOT SEND FEES OR opersons are required to re					d by the USPTO to process) g gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450, number.
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